

TACTICAL RESPONSE REPORT/Chicago Police Department

1. DATE OF INCIDENT 04-SEP-2012		2. ADDRESS OF OCCURRENCE 7433 S STATE ST CHICAGO, IL 60619		3. LOCATION CODE 303		4. BEAT/OCCUR 0323	
MEMBER INVOLVED	5. POSITION 9161	6. LAST NAME CLINTON	7. FIRST NAME SHANTELL D	8. STAR NO. 9012	9. SEX <input type="checkbox"/> M <input checked="" type="checkbox"/> F	10. RACE CODE BLK	11. AGE 505
	12. HT. 150	13. WT. 150	14. DATE OF APPT. 09-JUL-2007		15. EMPLOYEE NO. 003	16. UNIT & BEAT OF ASSIGNMENT 0368A	17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off
	18. MEMBER INJURED? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No	19. MEMBER IN UNIFORM? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No	20. LAST NAME ROBINSON		21. FIRST NAME GLENN	22. M.I. BLK	23. D.O.B. 602
SUBJECT INFORMATION	25. ADDRESS CHRIST		26. TELEPHONE NO. ER STAFF		27. WAS SUBJECT ARMED? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No		28. SUBJECT INJURED? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No
	29. SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		30. WHERE WAS MEDICAL TREATMENT OBTAINED? CHRIST		31. BY WHOM? ER STAFF		32. CONDITION <input checked="" type="checkbox"/> 01 Apparently Normal <input type="checkbox"/> 02 Under Influence
	33. CHARGES PLACED 18487818		34. DNA <input type="checkbox"/> DNA		35. CB NO. 18487818		36. IR NO. <input type="checkbox"/> DNA
REASON FOR USE OF FORCE (Check all that apply)	37. PASSIVE RESISTER		38. ACTIVE RESISTER		39. ASSAILANT ASSAULT		40. ASSAILANT BATTERY
	41. DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/>		42. FLED <input checked="" type="checkbox"/>		43. IMMINENT THREAT OF BATTERY <input checked="" type="checkbox"/>		44. ATTACK WITH WEAPON <input checked="" type="checkbox"/>
	45. STIFFENED (DEAD WEIGHT) <input type="checkbox"/>		46. PULLED AWAY <input type="checkbox"/>		47. OTHER DISCHARGE HANDGUN <input type="checkbox"/>		48. ATTACK WITHOUT WEAPON <input type="checkbox"/>
MEMBER'S RESPONSE	49. MEMBER PRESENCE <input checked="" type="checkbox"/>		50. OPEN HAND STRIKE <input type="checkbox"/>		51. ELBOW STRIKE <input type="checkbox"/>		52. KNEE STRIKE <input type="checkbox"/>
	53. VERBAL COMMANDS <input checked="" type="checkbox"/>		54. TAKE DOWN / EMERGENCY HANDCUFFING <input type="checkbox"/>		55. CLOSED HAND STRIKE/PUNCH <input type="checkbox"/>		56. KICKS <input type="checkbox"/>
	57. ESCORT HOLDS <input type="checkbox"/>		58. OC CHEMICAL WEAPON <input type="checkbox"/>		59. CANINE <input type="checkbox"/>		60. FIREARM <input checked="" type="checkbox"/>
WEAPON DISCHARGE INCIDENT	61. WHISTLOCK <input type="checkbox"/>		62. TASER (Probe Discharge) <input type="checkbox"/>		63. IMPACT WEAPON (Describe in Box 40) <input type="checkbox"/>		64. IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/>
	65. ARMBAR <input type="checkbox"/>		66. TASER (Contact Stun) <input type="checkbox"/>		67. TASER (Laser Targeted) <input type="checkbox"/>		68. OTHER SEMIAUTOMATIC HANDGUN <input type="checkbox"/>
	69. PRESSURE SENSITIVE AREAS <input type="checkbox"/>		70. TASER (Spark Displayed) <input type="checkbox"/>		71. OTHER <input type="checkbox"/>		72. OTHER <input type="checkbox"/>
CASE INFO.	73. OC/CHEMICAL WEAPON AUTHORIZED BY (NAME) OFFENDER DISCHARGED HANDGUN AT RO		74. ADDITIONAL INFORMATION OFFENDER DISCHARGED HANDGUN AT RO		75. WEAPON TYPE <input checked="" type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN		76. INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors
	77. WEAPON SERIAL NO. (Include Letters) SEV553		78. CHICAGO GUN REG. NO. R024334S		79. LIGHTING CONDITIONS <input type="checkbox"/> 01 Daylight <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input type="checkbox"/> 05 Poor Artificial <input type="checkbox"/> 06 Good Artificial		80. WEATHER CONDITIONS CLEAR
	81. TASER PART ID NO. 48		82. MAKE/MANUFACTURER GLOCK, INC. -AU-		83. MODEL 17		84. BARREL LENGTH 4.49
SIGNATURES	85. TASER CERTIFICATE NO. 53		86. FIREARM OWNER ID. NO. 53		87. HANDGUN CERTIFICATE NO. 53		88. SPECIAL WEAPON CERTIFICATE NO. 54
	89. PROPERTY/INVENTORY NO. 55		90. TYPE OF AMMUNITION USED Department Issued		91. NO. OF WEAPONS DISCHARGED BY THIS MEMBER 1		92. TOTAL NO. OF SHOTS MEMBER FIRED 2
	93. WHO FIRED FIRST SHOT <input type="checkbox"/> 01 MEMBER <input checked="" type="checkbox"/> 02 OFFENDER		94. WAS FIREARM RELOADED DURING INCIDENT? <input type="checkbox"/> 01 YES <input checked="" type="checkbox"/> 02 NO		95. NO. OF CARTRIDGES/SHOT SHELLS RELOADED 0		96. HOW WAS MEMBER'S HANDGUN WORN <input checked="" type="checkbox"/> 01 RT. SIDE (WAIST) <input type="checkbox"/> 02 LT. SIDE (WAIST) <input type="checkbox"/> 03 OTHER (Specify)
SIGNATURES	97. HOW WAS MEMBER'S HANDGUN DRAWN <input checked="" type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW		98. SPECIFY METHOD/EQUIPMENT USED TO RELOAD NONE		99. DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input checked="" type="checkbox"/> 02 NO		100. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC.) VEHICLE
	101. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 5 FT. <input type="checkbox"/> 02 5 - 10 FT. <input type="checkbox"/> 03 10 - 15 FT. <input checked="" type="checkbox"/> 04 OVER 15 FT.		102. POSITION OF MEMBER DISCHARGING WEAPON <input checked="" type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY)		103. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBER'S WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input checked="" type="checkbox"/> 04 UNKNOWN		104. NOTIFICATIONS (OC OR TASER INCIDENT): <input type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR.
	105. NOTIFICATIONS (FIREARM INCIDENT): <input checked="" type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR. <input checked="" type="checkbox"/> OP COMMAND <input checked="" type="checkbox"/> DET. DIV.		106. Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report.		107. REPORTING MEMBER (Print Name) CLINTON, SHANTELL D		108. STAR/EMPLOYEE NO. 9012
SIGNATURES	109. SIGNATURE 04-SEP-2012 08:28:04		110. SIGNATURE 04-SEP-2012 08:28:04		111. SIGNATURE 04-SEP-2012 08:28:04		112. SIGNATURE 04-SEP-2012 08:28:04
	113. REVIEWING SUPERVISOR (Print Name) ERBACHER, KYLE J		114. STAR NO. 2502		115. SIGNATURE 04-SEP-2012 10:34:49		116. DATE REVIEWED 04-SEP-2012 10:34:49
	117. SIGNATURE 04-SEP-2012 10:34:49		118. SIGNATURE 04-SEP-2012 10:34:49		119. SIGNATURE 04-SEP-2012 10:34:49		120. SIGNATURE 04-SEP-2012 10:34:49

CPD-11.377 (REV. 10/07)

LOG # 1056803

Attachment # 12

WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM; 2.) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR, 3.) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON.

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING: 1.) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON; 2.) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON; 3.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☐ REFUSED

☒ UNABLE TO INTERVIEW (Specify Reason)

Offender in surgery at Christ hospital for gun shot wounds sustained during incident.

76. WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

It is the preliminary determination of the undersigned based on the facts available at this time that Officer Clinton acted in compliance with department policy in that Officer Clinton fired her weapon at the offender after the offender pointed and fired a firearm at Officer Clinton.

77. WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION:

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES.

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO./CRNO. 1056803 OBTAINED

78. WATCH COMMANDER/OCIC (Print Name)

JOHNSON, EDDIE T

SIGNATURE

DATE COMPLETED

TIME

04-SEP-2012 10:46:58

79. DISTRIBUTION OF ORIGINAL TRR:

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS.

ATTACHMENTS - PHOTOCOPIES OF:

☐ CASE REPORT

☐ ARREST REPORT

☐ SUPPLEMENTARY REPORT

☒ OFFICER BATTERY REPORT

☐ TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)

☐ I.O.P. REPORT

☐ CR INITIATION REPORT

80. TOTAL TRR'S THIS EVENT No.

5

LOG # 1056803

Attachment # 12